## 15/506

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| Certified Copies             | Certificate    | s of Status |
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| Special Instructions to Fili | ing Officer:   |             |
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AUG 12 2013

R. WHITE



July 17, 2013

CAROL BELROSE CHAMBLISS DEVELOPMENT CORP 221 COMMERCIAL BLVD., SUITE 203 LAUDERDALE BY THE SEA, FL 33308 US

SUBJECT: CHAMBLISS DEVELOPMENT CORP.

Ref. Number: L51506

We have received your document for CHAMBLISS DEVELOPMENT CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

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Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II

Letter Number: 913A00017403



July 17, 2013

CAROL BELROSE CHAMBLISS DEVELOPMENT CORP 221 COMMERCIAL BLVD.,SUITE 203 LAUDERDALE BY THE SEA, FL 33308 US

SUBJECT: CHAMBLISS DEVELOPMENT CORP.

Ref. Number: L51506

We have received your document for CHAMBLISS DEVELOPMENT CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 913A00017403

Rebekah White Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

TO: Amendment Section Division of Corporations

| NAME OF CORPOR            | ATION: Chauble  | ss developmen                                       | × C07p.                       |
|---------------------------|---|---|-------------------------------|
| DOCUMENT NUMB             |   | •   |                               |
| The enclosed Articles of  | of Amendment and fee are su   | bmitted for filing.                                 |                               |
| Please return all corresp | ondence concerning this ma  | tter to the following:                              |                               |
|                           | Caral Role  | Name of Contact Persor                              |                               |
| <del>-</del>              | CONTRACTOR OF THE PARTY OF THE | Name of Contact Persor                              | 1                             |
| ,                         | 01 11-  |   | _                             |
| -                         | Champliss   | Name of Contact Person  Sevelopment ( Firm/ Company | <u>o.b.</u>                   |
|                           | 22. 0   |   |                               |
| -                         | HAL COMMIS  | Address   | d, sure dos                   |
|                           |   |   |                               |
| -                         | Landerdale  | City/ State and Zip Code                            | . <u>22208</u>                |
|                           |   | City/ State and 2.17 Cour                           |                               |
|                           | Carol ebra  | sed for future annual report                        |                               |
| <del></del>               | E-mail address: (to be us   | sed for future annual report                        | notification)                 |
|                           |   |   |                               |
| For further information   | concerning this matter, pleas   | se call:  |                               |
| 0                         |   |   |                               |
| <u>Carol Belo</u>         | f Contact Person  | at ( <u>4.54</u>                                    | de & Daytime Telephone Number |
| Name o                    | 1 Contact Person  | Area Co   | de & Daytime Telephone Number |
| Enclosed is a check for   | the following amount made   | payable to the Florida Depa                         | artment of State:             |
| \$35 Filing Fee           | □\$43.75 Filing Fee &   | □\$43.75 Filing Fee &                               | □\$52,50 Filing Fee           |
| Jess in ing i ce          | Certificate of Status   | Certified Copy                                      | Certificate of Status         |
|                           |   | (Additional copy is                                 | Certified Copy                |
|                           |   | enclosed)   | (Additional Copy              |
|                           |   |   | is enclosed)                  |
|                           | ing Address   |   | Address                       |
|                           | ndment Section  |   | Iment Section                 |
|                           | sion of Corporations Box 6327   |   | on of Corporations Building   |
|                           | hassee, FL 32314  |   | Executive Center Circle       |

Tallahassee, FL 32301

## Articles of Amendment

Articles of Incorporation

FILED

AUG 12 PM 4: 36

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to

| me must be distinguishable and contain the work<br>Forp., " "Inc., " or Co.," or the designation "Corp.<br>ord "chartered." "professional association." or the | " "Inc." or "Ca | "1 profe     | y," or "inco<br>essional corp | rporated" or the<br>oration name mus | TI<br>abbr<br>st_con |
|--|-----------------|--------------|-------------------------------|--------------------------------------|----------------------|
| Enter new principal office address, if applicable rincipal office address MUST BE A STREET ADD   |                 | A            |                               |                                      | <del></del>          |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.  | χ. <b>ν</b> η   | 4.           |                               |                                      |                      |
|  |                 |              |                               |                                      |                      |
| If amending the registered agent and/or register new registered agent and/or the new registered  |                 | s in Florid: | a, enter the r                | name of the                          | っ/ t<br>-<br>-       |
|  |                 | s in Florida | a, enter the r                | name of the                          | っ/ t<br>             |
| new registered agent and/or the new registered   |                 |              | a, enter the r                | name of the                          | <i>-</i><br>-        |
| new registered agent and/or the new registered   | office address: |              | a, enter the r                |                                      | _<br>~(t             |

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer: CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held President, Treasurer, Director would be PTD

Changes should be noted in the following manner: Currently John Doc is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation. Sally Smith is named the V and S. These should be noted as John Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add

| Example: X Change          | PT John                | <u>Doe</u>      |  |
|----------------------------|------------------------|-----------------|--|
| X Remove                   | <u>V</u> <u>Mike</u>   | Jones .         |  |
| <u>X</u> Add               | <u>SV</u> <u>Sally</u> | <u>Smith</u>    |  |
| Type of Action (Check One) | <u>Title</u>           | Name            | <u>Addres</u> s                        |
| 1) X Change                | CCEOD                  | Joe A. Chambiss | and his lat Assure                     |
| Add                        |                        |                 | Andria, FL 33325                       |
| Remove                     |                        |                 | <del></del>                            |
| 2) Change                  |                        |                 |  |
|                            |                        |                 |  |
| Remove                     |                        |                 |  |
| 3) Change                  |                        |                 |  |
| Add                        |                        |                 | ··-                                    |
| Remove                     |                        |                 |  |
| 4) Change                  |                        |                 |  |
| Add                        |                        |                 | ************************************** |
| Remove                     |                        | ·               |  |
| 5) Change                  |                        |                 |  |
| Add                        |                        |                 |  |
| Remove                     |                        |                 |  |
| 6) Change                  |                        |                 |  |
| Add                        |                        |                 |  |
| D                          |                        |                 |  |

| • <u>1</u><br>; ; | f <mark>amending or adding additional Artic</mark> l<br>strach <i>additional sheets, (f necessary).</i> | ies, enter change(s)<br>(Rasporitiva | nere.       | NIA                                    |      |
|-------------------|---|--------------------------------------|-------------|--|------|
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| į                 | <u>f an amendment provides for an excha</u>   | nge, reclassification                | i, or cance | ellation of issued shares,             |      |
|                   | provisions for implementing the amen  | dment if not contain                 | ned in the  | amendment itself:                      | 10/1 |
|                   | (if not applicable, indicate N/A)   |                                      |             |  |      |
|                   |   |                                      |             |  |      |
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| The date of each amend                          | ment(s) adoption:   |
|---|---|
| Effective date <u>if applica</u>                | ble:  (no more than 90 days after amendment file date)  |
| Adoption of Amendmen                            | t(s) ( <u>CHECK ONE</u> )   |
| The amendment(s) wa<br>by the shareholders w    | s/were adopted by the shareholders. The number of votes east for the amendment(s) as/were sufficient for approval.  |
|   | is/were approved by the shareholders through voting groups. The following statement covided for each voting group entitled to vote separately on the amendment(s).  |
| "The number of                                  | votes east for the amendment(s) was/were sufficient for approval  |
| hy  | (voting group)  |
| ☐ The amendment(s) wa<br>action was not require | s/were adopted by the board of directors without shareholder action and shareholder d.  |
| ☐ The amendment(s) wa<br>action was not require | is/were adopted by the incorporators without shareholder action and shareholder d.  |
| Dated_  | July 11 2013  |
| Signati   | (By a diverse) The sident of other officer – if directors or officers have not been selected by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) |
|   | Joe A. Chambia  |
|   | (Typed or printed name of person signing)   |
|   | Chairman, Cto   |
|   | (Title of person signing)   |